



In re application of: Stephen M. Wiener et al.

Application No.: 09/700,999

Filed: December 4, 2000 Confirmation No.: 4557

For: METHOD FOR PRESSURE MEDIATED

SELECTIVE DELIVERY OF

THERAPEUTIC SUBSTANCES AND

CANNULA

Examiner: Theodore J. Stigell

Art Unit: 3763

Attorney Reference No.: 4239-56467-01

MAIL STOP AMENDMENT COMMISSIONER FOR PATENTS P.O. BOX 1450 ALEXANDRIA, VA 22313-1450

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP AMENDMENT, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney or Agent for Applicant(s)___

Date Mailed January 9, 2006

TRANSMITTAL LETTER

Enclosed is an Amendment and Reply to Restriction Requirement for the above application. The fee has been calculated as shown below.

CLAIMS AS AMENDED						
For	No. after amendment	No. paid for previously		Present Extra	Rate	Fee
Total Claims	78	- 78*	=	0	\$50.00	\$ 0.00
Indep. Claims	9	- 9**	=	0	\$200.00	\$ 0.00
Mult. Dep. Claims Fee (if not previously paid)					\$360.00	
One-month Extension of Time					\$120.00	\$120.00
Two-month Extension of Time					\$450.00	
Three-month Extension of Time					\$1,020.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$120.00

^{*} greater of twenty or number for which fee has been paid.

^{**} greater of three or number for which fee has been paid.

- Applicants petition for an extension of time for the number of months indicated above. If an additional extension of time is required please consider this a petition therefor.
- \triangle A check in the amount of \$120.00 is attached for payment of a one-month extension fee.
- Please charge any additional fees that may be required in connection with filing this amendment and any extension of time, or credit any overpayment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- If the Patent and Trademark Office determines that this amendment results in an additional application size fee for pages in excess of 100, please charge the fee to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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By

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cc: Docketing